

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.B.		10/26/99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	KNO	71477	11/4/99

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Original	Date
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Claim	Original	Date
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Claim	Original	Date
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If more than 150 claims or 10 actions  
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